

Clerk stamps date here when form is filed.

Use this form to respond to the *Request to Renew Restraining Order* (Form CH-700)

- Fill out this form and then take it to the court clerk.
- Have someone age 18 or older—**not the restrained person**—serve the protected person by mail with a copy of this form and any attached pages. (*Use Form CH-250, Proof of Service or Response by Mail.*)

1 Protected Person (*Form CH-700, item 1*)

Name: _____

Court name and street address:

Superior Court of California, County of**2 Restrained Person**

a. Your Name: _____

Your Lawyer (*if you have one for this case*):

Name: _____ State Bar No.: _____

Firm Name: _____

b. Your Address (*If you have a lawyer, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, you may give a different mailing address instead. You do not have to give telephone, fax, or e-mail.*):

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

E-Mail Address: _____

Fill in case number:

Case Number:

The court will consider your *Response* at the hearing. Write your hearing date, time, and place from Form CH-710 item ③ here.

**Hearing
Date**

→ Date: _____

Time: _____

Dept.: _____ Room: _____

3 Response

- a. ☐ I agree to extend the order.
- b. ☐ I do not agree to extend the order.
- c. ☐ I agree to the following order instead (*specify below*):
- ☐ Check here if there is not enough space for your answer. Attach a sheet of paper and write "Attachment 3c—Order Requested" for a title. You may use Form MC-025, Attachment.

- d. ☐ I ask the court not to renew the order for the following reasons (*specify below*):
- ☐ Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or Form MC-025 and write "Attachment 3d—Reasons Not to Renew" for a title.



Case Number:

Date: _____

Lawyer's name, if you have one



Lawyer's signature

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: _____

Type or print your name



Sign your name